

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:)

ROBERT TAE HA, M.D.)

Physician's and Surgeon's)
Certificate No. A 55299)

Respondent)
_____)

Case No. 800-2016-025318

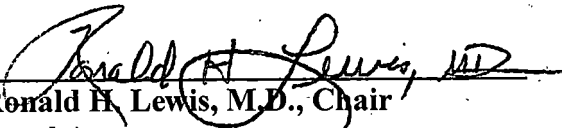
DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on May 3, 2019.

IT IS SO ORDERED: April 5, 2019.

MEDICAL BOARD OF CALIFORNIA



Ronald H. Lewis, M.D., Chair
Panel A

1 XAVIER BECERRA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 MICHAEL J. YUN
Deputy Attorney General
4 State Bar No. 292587
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9453
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

9
10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 800-2016-025318

14 **ROBERT TAE HA, M.D.**
18111 Brookhurst St., Apt. 6300
15 Fountain Valley, CA 92708

OAH No. 2018090262

16 **Physician's and Surgeon's Certificate**
17 **No. A 55299**

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

18 Respondent.
19

20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (complainant) is the Executive Director of the Medical Board
24 of California (Board). She brought this action solely in her official capacity and is represented in
25 this matter by Xavier Becerra, Attorney General of the State of California, by Michael J. Yun,
26 Deputy Attorney General.

27 2. Respondent Robert Tae Ha, M.D. (respondent) is represented in this proceeding by
28 attorney Raymond J. McMahon, Esq., whose address is: 5440 Trabuco Road, Irvine, CA 92620.

3. On or about November 29, 1995, the Board issued Physician's and Surgeon's Certificate No. A 55299 to Robert Tae Ha, M.D. (respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2016-025318, and will expire on March 31, 2019, unless renewed.

JURISDICTION

4. On July 20, 2018, Accusation No. 800-2016-025318 was filed before the Board, and is currently pending against respondent. The Accusation and all other statutorily required documents were properly served on respondent on July 20, 2018, at his official Address of Record with the Board, and on August 7, 2018, at his two (2) alternate mailing addresses. Respondent filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2016-025318 is attached as Exhibit 1 and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2016-025318. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order on his Physician's and Surgeon's Certificate No. A 55299.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in Accusation No. 800-2016-025318; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act, the California Code of Civil Procedure, and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every one of the rights set forth and/or referenced above.

///

///

1

2

6

1

4

5

1

1 not approve and adopt this Stipulated Settlement and Disciplinary Order, with the exception of
2 this paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and
3 shall not be relied upon or introduced in any disciplinary action by either party hereto.

4 Respondent further agrees that should the Board reject this Stipulated Settlement and Disciplinary
5 Order for any reason, respondent will assert no claim that the Board, or any member thereof, was
6 prejudiced by its/his/her review, discussion and/or consideration of this Stipulated Settlement and
7 Disciplinary Order or of any matter or matters related hereto.

8 **ADDITIONAL PROVISIONS**

9 14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
10 be an integrated writing representing the complete, final and exclusive embodiment of the
11 agreements of the parties in the above-entitled matter.

12 15. The parties understand and agree that copies of this Stipulated Settlement and
13 Disciplinary Order may be used, including copies of the signatures of the parties, in lieu of
14 original documents and signatures and, further, shall have the same force and effect as the
15 originals.

16 16. In consideration of the foregoing admissions and stipulations, the parties agree that
17 the Board may, without further notice or opportunity to be heard by respondent, issue and enter
18 the following Disciplinary Order:

19 **DISCIPLINARY ORDER**

20 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 55299 issued
21 to respondent Robert Tae Ha, M.D., is revoked. However, the revocation is stayed and
22 respondent is placed on probation for thirty-five (35) months on the following terms and
23 conditions:

24 1. **EDUCATION COURSE** Within 60 calendar days of the effective date of this
25 Decision, and on an annual basis thereafter, respondent shall submit to the Board or its designee
26 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
27 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
28 correcting any areas of deficient practice or knowledge, i.e. monitoring test results and

conducting follow-ups, and shall be Category I certified. The educational program(s) or course(s) shall be at respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test respondent's knowledge of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40 hours were in satisfaction of this condition.

2. **MEDICAL RECORD KEEPING COURSE** Within 60 calendar days of the effective date of this Decision, respondent shall enroll in a course in medical record keeping approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The medical record keeping course shall be at respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A medical record keeping course taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the course, or not later than 15 calendar days after the effective date of the Decision, whichever is later.

3. **MONITORING - PRACTICE** Within 30 calendar days of the effective date of this Decision, respondent shall submit to the Board or its designee for prior approval as a practice monitor(s), the name and qualifications of one or more licensed physicians and surgeons whose licenses are valid and in good standing, and who are preferably American Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current business or personal

1 relationship with respondent, or other relationship that could reasonably be expected to
2 compromise the ability of the monitor to render fair and unbiased reports to the Board, including
3 but not limited to any form of bartering, shall be in respondent's field of practice, and must agree
4 to serve as respondent's monitor. Respondent shall pay all monitoring costs.

5 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
6 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the
7 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed
8 statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role
9 of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees
10 with the proposed monitoring plan, the monitor shall submit a revised monitoring plan with the
11 signed statement for approval by the Board or its designee.

12 Within 60 calendar days of the effective date of this Decision, and continuing throughout
13 probation, respondent's practice shall be monitored by the approved monitor. The practice
14 monitor condition shall be deemed completed if respondent successfully completes the first two
15 (2) years of the practice monitor requirement without any problem. Respondent shall make all
16 records available for immediate inspection and copying on the premises by the monitor at all
17 times during business hours and shall retain the records for the entire term of probation.

18 If respondent fails to obtain approval of a monitor within 60 calendar days of the effective
19 date of this Decision, respondent shall receive a notification from the Board or its designee to
20 cease the practice of medicine within three (3) calendar days after being so notified. Respondent
21 shall cease the practice of medicine until a monitor is approved to provide monitoring
22 responsibility.

23 The monitor(s) shall submit a quarterly written report to the Board or its designee which
24 includes an evaluation of respondent's performance, indicating whether respondent's practices are
25 within the standards of practice of medicine, and whether respondent is practicing medicine
26 safely. It shall be the sole responsibility of respondent to ensure that the monitor submits the
27 quarterly written reports to the Board or its designee within 10 calendar days after the end of the
28 preceding quarter.

1 If the monitor resigns or is no longer available, respondent shall, within 5 calendar days of
2 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
3 name and qualifications of a replacement monitor who will be assuming that responsibility within
4 15 calendar days. If respondent fails to obtain approval of a replacement monitor within 60
5 calendar days of the resignation or unavailability of the monitor, respondent shall receive a
6 notification from the Board or its designee to cease the practice of medicine within three (3)
7 calendar days after being so notified. Respondent shall cease the practice of medicine until a
8 replacement monitor is approved and assumes monitoring responsibility.

9 In lieu of a monitor, respondent may participate in a professional enhancement program
10 approved in advance by the Board or its designee that includes, at minimum, quarterly chart
11 review, semi-annual practice assessment, and semi-annual review of professional growth and
12 education. Respondent shall participate in the professional enhancement program at respondent's
13 expense during the term of probation.

14 4. **NOTIFICATION** Within seven (7) days of the effective date of this Decision,
15 respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
16 Chief Executive Officer at every hospital where privileges or membership are extended to
17 respondent, at any other facility where Respondent engages in the practice of medicine, including
18 all physician and locum tenens registries or other similar agencies, and to the Chief Executive
19 Officer at every insurance carrier which extends malpractice insurance coverage to respondent.
20 Respondent shall submit proof of compliance to the Board or its designee within 15 calendar
21 days.

22 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

23 5. **OBEY ALL LAWS** Respondent shall obey all federal, state and local laws, all rules
24 governing the practice of medicine in California and remain in full compliance with any court
25 ordered criminal probation, payments, and other orders.

26 6. **QUARTERLY DECLARATIONS** Respondent shall submit quarterly declarations
27 under penalty of perjury on forms provided by the Board, stating whether there has been
28 compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

7. **GENERAL PROBATION REQUIREMENTS**

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

Respondent shall, at all times, keep the Board informed of respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

Place of Practice

Respondent shall not engage in the practice of medicine in respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Respondent shall maintain a current and renewed California physician's and surgeon's license.

Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event respondent should leave the State of California to reside or to practice, respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

8. **INTERVIEW WITH THE BOARD OR ITS DESIGNEE** Respondent shall be available in person upon request for interviews either at respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.

1 9. **NON-PRACTICE WHILE ON PROBATION** Respondent shall notify the Board
2 or its designee in writing within 15 calendar days of any periods of non-practice lasting more than
3 30 calendar days and within 15 calendar days of respondent's return to practice. Non-practice is
4 defined as any period of time respondent is not practicing medicine as defined in Business and
5 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
6 patient care, clinical activity or teaching, or other activity as approved by the Board. If
7 respondent resides in California and is considered to be in non-practice, respondent shall comply
8 with all terms and conditions of probation. All time spent in an intensive training program which
9 has been approved by the Board or its designee shall not be considered non-practice and does not
10 relieve respondent from complying with all the terms and conditions of probation. Practicing
11 medicine in another state of the United States or Federal jurisdiction while on probation with the
12 medical licensing authority of that state or jurisdiction shall not be considered non-practice. A
13 Board-ordered suspension of practice shall not be considered as a period of non-practice.

14 In the event respondent's period of non-practice while on probation exceeds 18 calendar
15 months, respondent shall successfully complete the Federation of State Medical Board's Special
16 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
17 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
18 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

19 Respondent's period of non-practice while on probation shall not exceed two (2) years.

20 Periods of non-practice will not apply to the reduction of the probationary term.

21 Periods of non-practice for a respondent residing outside of California will relieve
22 respondent of the responsibility to comply with the probationary terms and conditions with the
23 exception of this condition and the following terms and conditions of probation: Obey All Laws;
24 General Probation Requirements; and Quarterly Declarations.

25 10. **COMPLETION OF PROBATION** Respondent shall comply with all financial
26 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
27 completion of probation. Upon successful completion of probation, respondent's certificate shall
28 be fully restored.

1 11. **VIOLATION OF PROBATION** Failure to fully comply with any term or
2 condition of probation is a violation of probation. If respondent violates probation in any respect,
3 the Board, after giving respondent notice and the opportunity to be heard, may revoke probation
4 and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke
5 Probation, or an Interim Suspension Order is filed against respondent during probation, the Board
6 shall have continuing jurisdiction until the matter is final, and the period of probation shall be
7 extended until the matter is final.

8 12. **LICENSE SURRENDER** Following the effective date of this Decision, if
9 respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
10 the terms and conditions of probation, respondent may request to surrender his or her license.
11 The Board reserves the right to evaluate respondent's request and to exercise its discretion in
12 determining whether or not to grant the request, or to take any other action deemed appropriate
13 and reasonable under the circumstances. Upon formal acceptance of the surrender, respondent
14 shall within 15 calendar days deliver respondent's wallet and wall certificate to the Board or its
15 designee and respondent shall no longer practice medicine. Respondent will no longer be subject
16 to the terms and conditions of probation. If respondent re-applies for a medical license, the
17 application shall be treated as a petition for reinstatement of a revoked certificate.

18 13. **PROBATION MONITORING COSTS** Respondent shall pay the costs associated
19 with probation monitoring each and every year of probation, as designated by the Board, which
20 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
21 California and delivered to the Board or its designee no later than January 31 of each calendar
22 year.

23 ///

24 ///

25 ///

26 ///

27 ///

28 ///

1 ACCEPTANCE

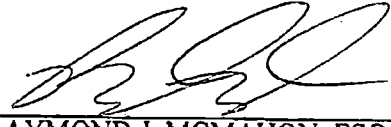
2 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
3 discussed it with my attorney, Raymond J. McMahon, Esq. I understand the stipulation and the
4 effect it will have on my Physician's and Surgeon's Certificate No. A 55299. I enter into this
5 Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree
6 to be bound by the Decision and Order of the Medical Board of California.

7
8 DATED: 2/12/19


9 ROBERT TAE HA, M.D.
Respondent

10 I have read and fully discussed with respondent Robert Tae Ha, M.D., the terms and
11 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
12 I approve its form and content.

13 DATED: 2/12/19


14 RAYMOND J. MCMAHON, ESQ.
Attorney for Respondent

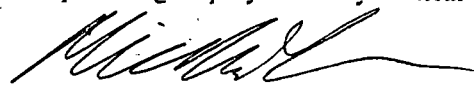
15
16 ENDORSEMENT

17 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
18 submitted for consideration by the Medical Board of California.

19 Dated: 2/13/19

20 Respectfully submitted,

21 XAVIER BECERRA
Attorney General of California
22 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General

23 
24 MICHAEL J. YUN
25 Deputy Attorney General
26 Attorneys for Complainant

27
28 SD2018700392
71741236.docx

Exhibit 1

Accusation No. 800-2016-025318

1 XAVIER BECERRA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 MICHAEL J. YUN
Deputy Attorney General
4 State Bar No. 292587
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9453
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO July 20 2018
BY K. Vong ANALYST

10 BEFORE THE
11 MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
12 STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 800-2016-025318

14 **ROBERT TAE HA, M.D.**
8700 Warner Avenue, #140
15 Fountain Valley, CA 92708

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 55299,**

18 Respondent.

20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California.

24 2. On or about November 29, 1995, the Medical Board of California (Board) issued
25 Physician's and Surgeon's Certificate No. A 55299 to Robert Tae Ha, M.D. (respondent). The
26 Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the
27 charges brought herein and will expire on March 31, 2019, unless renewed.

28 ///

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2004 of the Code states, in pertinent part:

“The board shall have the responsibility for the following:

“(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.

“...

“(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.

“(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board.

“...”

5. Section 2227 of the Code states, in pertinent part:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

“(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

“...”

///

///

1 “(5) Have any other action taken in relation to discipline as part of an order of
2 probation, as the board or an administrative law judge may deem proper.

3 “...”

4 6. Section 2234 of the Code states, in pertinent part:

5 “The board shall take action against any licensee who is charged with
6 unprofessional conduct. In addition to other provisions of this article, unprofessional
7 conduct includes, but is not limited to, the following:

8 “(a) Violating or attempting to violate, directly or indirectly, assisting in or
9 abetting the violation of, or conspiring to violate any provision of this chapter.

10 “(b) Gross negligence.

11 “(c) Repeated negligent acts. To be repeated, there must be two or more
12 negligent acts or omissions. An initial negligent act or omission followed by a
13 separate and distinct departure from the applicable standard of care shall constitute
14 repeated negligent acts.

15 “(1) An initial negligent diagnosis followed by an act or omission medically
16 appropriate for that negligent diagnosis of the patient shall constitute a single
17 negligent act.

18 “(2) When the standard of care requires a change in the diagnosis, act, or
19 omission that constitutes the negligent act described in paragraph (1), including, but
20 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
21 licensee’s conduct departs from the applicable standard of care, each departure
22 constitutes a separate and distinct breach of the standard of care.

23 “...”

24 7. Section 2266 of the Code states:

25 “The failure of a physician and surgeon to maintain adequate and accurate
26 records relating to the provision of services to their patients constitutes unprofessional
27 conduct.”

28 ///

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Gross Negligence)**

3 8. Respondent has subjected his Physician's and Surgeon's Certificate No. A 55299 to
4 disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of
5 the Code, in that he was grossly negligent in his care and treatment of one patient, as more
6 particularly alleged hereinafter:

7 Patient A¹.

8 A. On or about February 25, 2015, Patient A, a primary care patient of
9 respondent, at the direction of respondent, underwent testing of his serum Prostate
10 Specific Antigen (PSA) level, which is a screening test for prostate cancer. The result
11 from that test was 5.43 ng/ml. The normal range for PSA level is less than 4.00
12 ng/ml. Patient A's test result was immediately obtained and forwarded to
13 respondent's clinic.

14 B. On or about May 13, 2015, Patient A was seen by respondent. Patient
15 A's chief complaint was urination difficulty. Respondent did not document any result
16 of a digital rectal examination that included palpation of the prostate gland. At that
17 time, respondent failed to address to Patient A his abnormal PSA level result obtained
18 from the February 25, 2015 test. The test result had been available at respondent's
19 clinic for over two (2) months prior to the May 13, 2015 visit.

20 C. On or about May 14, 2015, Patient A underwent testing of his serum PSA
21 level again. The result was 7.95 ng/ml. The normal range for PSA level is less than
22 4.00 ng/ml. The test result was immediately obtained and forwarded to respondent's
23 clinic.

24 D. On or about May 18, 2015, Patient A was seen by respondent. Patient
25 A's chief complaint was headache. Respondent's note in Patient A's charts focused
26 on the assessment of Patient A's headaches. Respondent also documented that

27 ¹ The sole patient referenced in this document is designated as "Patient A" in order to
28 protect his privacy interest.

1 Patient A's past medical history included "benign localized hyperplasia of prostate."
2 However, respondent did not document the results of previous abnormal PSA levels
3 (5.43 ng/ml from February 25, 2015 and 7.95 ng/ml from May 14, 2015). Respondent
4 also did not document a plan for the management of the abnormal PSA levels.
5 Respondent failed to address to Patient A his abnormal PSA level results and failed to
6 provide a plan for the management of the abnormal PSA levels.

7 E. On or about June 24, 2015, Patient A was seen by respondent. Patient A
8 complained of frequent urination. Nevertheless, respondent did not document a
9 history of present illness about the complaint. Respondent's assessment of Patient A
10 was benign prostatic hyperplasia, and his plan for the patient was Flomax 0.4 mg
11 orally twice daily. At the bottom of his note, respondent documented, "Referral to
12 uro due to increased PSA." Patient A informed the Board that respondent never made
13 such a referral on this date. Patient A claimed this note regarding referral must have
14 been added onto the medical record on a later date.

15 F. On or about November 20, 2015, Patient A was seen by respondent.
16 Patient A's chief complaint was lower back pain. Again, respondent did not
17 document information about Patient A's previous abnormal PSA levels. Moreover,
18 respondent did not document the status of his referral of the patient to a urologist,
19 which he allegedly documented on June 24, 2015.

20 G. On or about November 21, 2015, Patient A underwent testing of his
21 serum PSA level. The result was 16.09 ng/ml. The test result was immediately
22 obtained and forwarded to respondent's clinic.

23 H. On or about December 18, 2015, Patient A underwent testing of his serum
24 PSA level. The result was 18.72 ng/ml. The test result was immediately obtained and
25 forwarded to respondent's clinic.

26 I. On or about December 28, 2015, Patient A underwent testing of his serum
27 PSA level. The result was 20.29 ng/ml. The test result was immediately obtained and
28 forwarded to respondent's clinic.

1 J. On or about January 6, 2016, Patient A's prostate gland was biopsied by
2 urologist, Dr. S.K.Y. The result of biopsy was Prostatic Adenocarcinoma, more
3 commonly known as Prostate Cancer.

4 K. Respondent committed gross negligence in his care and treatment of
5 Patient A, which included, but was not limited to, the following:

6 (1) Failing to record in his progress notes the results of Patient A's screening
7 tests for prostate cancer (i.e., serum PSA levels), and the result of his referring Patient
8 A to a specialist (i.e., urologist);

9 (2) Failing to follow up the results of Patient A's abnormal serum PSA
10 levels, which resulted in a delay in Patient A being referred to a specialist (i.e., a
11 urologist) who could assist in determining if the patient had prostatic
12 adenocarcinoma, Prostate Cancer; and

13 (3) Failing to guarantee that Patient A, who had evidence of prostate cancer,
14 was assessed and treated by a specialist (i.e., a urologist) urgently.

15 **SECOND CAUSE FOR DISCIPLINE**

16 **(Repeated Negligence)**

17 9. Respondent has further subjected his Physician's and Surgeon's Certificate No.
18 A 55299 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
19 subdivision (c), of the Code, in that he was repeatedly negligent in his care and treatment of
20 Patient A, as more particularly alleged in paragraph 8, above, and which is hereby incorporated by
21 reference and realleged as if fully set forth herein.

22 **THIRD CAUSE FOR DISCIPLINE**

23 **(Failure to Maintain Adequate and Accurate Records)**

24 10. Respondent has further subjected his Physician's and Surgeon's Certificate No.
25 A 55299 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
26 Code, in that he failed to maintain adequate and accurate records regarding his care and treatment
27 of Patient A, as more particularly alleged in paragraph 8, above, which is hereby incorporated by
28 reference and realleged as if fully set forth herein.

1 **FOURTH CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct)**


3 11. Respondent has further subjected his Physician's and Surgeon's Certificate No.
4 A 55299 to disciplinary action under sections 2227 and 2234, of the Code, in that he has engaged
5 in conduct which breaches the rules or ethical code of the medical profession, or conduct which is
6 unbecoming a member in good standing of the medical profession, and which demonstrates an
7 unfitness to practice medicine, as more particularly alleged in paragraphs 8 through 10, above,
8 which are hereby incorporated by reference and realleged as if fully set forth herein.

9 **PRAYER**

10 WHEREFORE, complainant requests that a hearing be held on the matters herein alleged,
11 and that following the hearing, the Medical Board of California issue a decision:

- 12 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 55299, issued to
13 respondent Robert Tae Ha, M.D.;
- 14 2. Revoking, suspending or denying approval of respondent Robert Tae Ha, M.D.'s
15 authority to supervise physician assistants, pursuant to section 3527 of the Code, and advanced
16 practice nurses;
- 17 3. Ordering respondent Robert Tae Ha, M.D. to pay the Medical Board of California the
18 costs of probation monitoring, if placed on probation; and
- 19 4. Taking such other and further action as deemed necessary and proper.

20
21 DATED: July 20, 2018


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
State of California
Complainant

22
23
24
25 SD2018700392
26 71522999.doc
27
28